## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/597125

|  |  | Επε                              |   |                      | 1901110                         |                                   |       |                    |                        |                               |                               |                        |  |
|--|--|----------------------------------|---|----------------------|---------------------------------|-----------------------------------|-------|--------------------|------------------------|-------------------------------|-------------------------------|------------------------|--|
| ,  |  | CLAIMS A                         | S FILED -   | •                    |                                 | (Column 2)                        |       | SMALL ENTITY TYPE  |                        | OTHER THAN<br>OR SMALL ENTITY |                               |                        |  |
| U.S.   | . NATIONAL S                                   | TAGE FEES                        |   |                      |                                 |                                   |       | RATE               | FEE                    |                               | RATE                          | FEE                    |  |
| BASIC FEE  |  |                                  | SMALL ENT. = \$ 150   |                      | LARG                            | SE ENT. = \$ 300                  | В     | ASIC FEE           |                        | OR                            | BASIC FEE                     | 300                    |  |
| EXAMINATION FEE  |  |                                  | Satisfies PCT Article 33(1)-<br>(4) = \$50/\$100                        |                      |                                 | her situations =<br>100 / \$ 200  | E     | XAM. FEE           |                        |                               | EXAM. FEE                     | ZOD                    |  |
| SEA  | RCH FEE  |                                  | U.S. is ISA = \$50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |                      | ALLO                            | ther situations =<br>250 / \$ 500 | sı    | EARCH FEE          |                        |                               | SEARCH FEE                    | 400                    |  |
| FEE  | FOR EXTRA S                                    | PEC. PGS.                        | 13 min  | nus 100 =            |                                 | / 50 =                            |       | X \$ 125 =         |                        |                               | X \$ 250 =                    |                        |  |
| TOTAL CHARGEABLE CLAIMS  |  |                                  | 20 mi   | inus 20 =            | . —                             |                                   |       | X \$ 25 =          |                        | OR                            | X \$ 50 =                     |                        |  |
| INDE   | EPENDENT CLA                                   | AIMS                             | 3 "   | minus 3 =            | . –                             | -                                 |       | X \$ 100 =         |                        | OR                            | X \$ 200 =                    |                        |  |
| MUL  | TIPLE DEPENI                                   | DENT CLAIM PRE                   | ESENT   |                      |                                 |                                   |       | + \$ 180 =         |                        | OR                            | + \$ 360 =                    |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                                  |   |                      |                                 |                                   |       | TOTAL              |                        | OR                            | TOTAL                         | 900                    |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |  |                                  |   |                      |                                 |                                   |       | SMALL ENTITY       |                        |                               | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| Ų<br>Į<br>Į  | 7/12/04  | CLAIMS REMAINING AFTER AMENDMENT |   | NUM<br>PREVI         | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA                  |       | RATE               | ADDI-<br>TIONAL<br>FEE |                               | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT A  | Total  | 20                               | Minus   | " 2                  | 0                               | -                                 |       | X \$ 25 =          | 7                      | ÓR                            | X \$ 50 =                     | /                      |  |
| AMEN   | Independent                                    | . 3                              | Minus   | ئ ***                | 3_                              | -/                                |       | X \$ 100 =         |                        | OR                            | X \$ 200 =                    |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |   |                      |                                 |                                   |       | + \$ 180 =         |                        | OR                            | + % 360 =                     |                        |  |
|  | h  |                                  |   |                      |                                 |                                   | ' · 📅 | OTAL ADDIT.<br>FEE |                        | OR                            | TOTAL ADDIT. FEE              |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |                                  |   |                      |                                 |                                   |       |                    |                        |                               |                               |                        |  |
| ±8<br>18   |  | CLAIMS REMAINING AFTER AMENDMENT |   | HIGH<br>NUM<br>PREVI | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA                  |       | RATE               | ADDI-<br>TIONAL<br>FEE |                               | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT B  | Total  | *                                | Minus   | **                   |                                 | =                                 |       | X \$ 25 =          |                        | OR                            | X \$ 50 =                     |                        |  |
| MEN  | Independent                                    | *                                | Minus   | *** .                |                                 | =                                 |       | X \$ 100 =         |                        | OR                            | X \$ 200 =                    |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |   |                      |                                 |                                   |       | + \$ 180 =         |                        | OR                            | + \$ 360 =                    |                        |  |
|  |  |                                  |   |                      |                                 |                                   | 1     | OTAL ADDIT.<br>FEE |                        | OR                            | TOTAL ADDIT.<br>FEE           |                        |  |
|  | if the entry in coi                            | lumn 1 is less than th           | ne entry in colum   | nn 2, write "0'      | " in colum                      | nn 3.                             |       |                    |                        |                               | ·                             |                        |  |

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.